

"Express Mail" mailing label number _____.

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

<div>0010/PTO Rev. 6/95</div> <div>U.S. Department of Commerce Patent and Trademark Office</div> <div style="margin-top: 20px;">DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</div> <div style="margin-top: 20px;"><input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing</div>	Attorney Docket Number	C 2944 PCT/US	
	First Named Inventor	MUELLER, Heinz	
	<i>COMPLETE IF KNOWN</i>		
	Application Number	10/595,083	
	Filing Date	February 3, 2006	
	Group Art Unit		
	Examiner Name		

As a below named inventor, I hereby declare that:
My residence, post office address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

USE OF ETHOXYLATED AMIDOAMINES AS EMULSIFIERS IN DRILLING FLUIDS

(Title of the Invention)

the specification of which ☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/14/2005 as United States Application Number or PCT International

Application Number PCT/EP2005/011071 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
102004051280.9	Germany	10/21/2004	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Type a plus sign (+) inside this box →

C 2944 PCT/US

DECLARATION**Page 2**

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP2005/011071	10/14/2005	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Firm Name **23657** Customer Number or label

☐ List Attorney(s) and/or agent(s) name and registration number below:

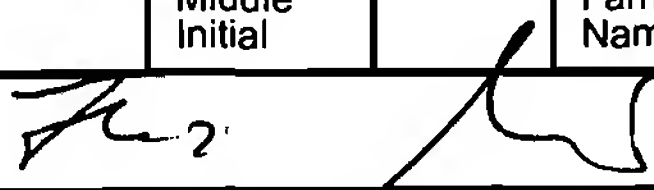
Name	Registration Number	Name	Registration Number

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label **23657** OR ☐ Fill in correspondence address below

Name			
Address			
Address			
City	State	Zip	
Country	Telephone	Fax	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name	Heinz	Middle Initial		Family Name	MUELLER	Suffix e.g. Jr.			
Inventor's Signature					Date	20.02.2006			
Residence: City	Monheim	State		Country	Germany	Citizenship	German		
Post Office Address	Sperberstrasse 5								
Post Office Address									
City	40789 Monheim	State		Zip		Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									

Type a plus sign (+) inside this box → ☐

C 2944 PCT/US

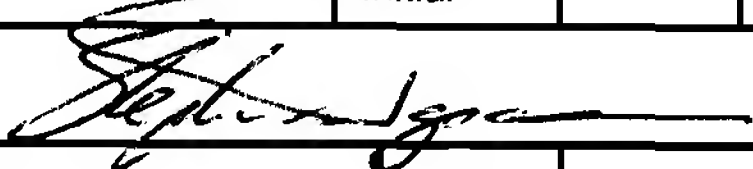
**SIGN
DATE**

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet			
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Jens	Middle Initial		Family Name	HARTMANN	Suffix e.g. Jr.	
Inventor's Signature	<i>Jens HL</i>				Date	March 07, 2006	
Residence: City	Bidnija	State		Country	Malta	Citizenship	German
Post Office Address	Park Lodge Nr. 2, Bidnija Road						
Post Office Address							
City	MST 13, Bidnija	State		Zip		Country	Malta
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Stephan	Middle Initial		Family Name	von TAPAVICZA	Suffix e.g. Jr.	
Inventor's Signature	<i>Stephan von Tapavicza</i>				Date	Feb 22, 2006	
Residence: City	Erkrath	State		Country	Germany	Citizenship	German
Post Office Address	Thomas-Mann-Strasse 12						
Post Office Address							
City	40699 Erkrath	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Diana	Middle Initial		Family Name	MAEKER	Suffix e.g. Jr.	
Inventor's Signature	<i>Diana Maeker</i>				Date	20.02.2006	
Residence: City	Monheim	State		Country	Germany	Citizenship	German
Post Office Address	Brandenburgerallee 8A						
Post Office Address							
City	40789 Monheim	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
City		State		Zip		Country	
						Applicant Authority	

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

Type a plus sign (+) inside this box → ☐

C 2944 PCT/US

DECLARATION					ADDITIONAL INVENTOR(S) Supplemental Sheet		
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Jens	Middle Initial		Family Name	HARTMANN	Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City	Bidnija	State		Country	Malta	Citizenship	German
Post Office Address	Park Lodge Nr. 2, Bidnija Road						
Post Office Address							
City	MST 13, Bidnija	State		Zip		Country	Malta
						Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Stephan	Middle Initial		Family Name	von TAPAVICZA	Suffix e.g. Jr.	
Inventor's Signature					Date	Feb 22, 2006	
Residence: City	Erkrath	State		Country	Germany	Citizenship	German
Post Office Address	Thomas-Mann-Strasse 12						
Post Office Address							
City	40699 Erkrath	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name	Diana	Middle Initial		Family Name	MAEKER	Suffix e.g. Jr.	
Inventor's Signature	Diana Maeker				Date	20.02.2006	
Residence: City	Monheim	State		Country	Germany	Citizenship	German
Post Office Address	Brandenburgerallee 8A						
Post Office Address							
City	40789 Monheim	State		Zip		Country	Germany
						Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
City		State		Zip		Country	
						Applicant Authority	

☐ Additional inventors are being named on supplemental sheet(s) attached hereto